

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	TID		6/23/99
O.I.P.E. CLASSIFIER		32	7/25
FORMALITY REVIEW		68971	7/2/99

INDEX OF CLAIMS

..... Rejected
 Allowed
 (Through numeral)..... Canceled
 Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1	08/01
2	08/01
3	08/01
4	08/01
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50	08/01

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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